**Faculty of Arts, Chulalongkorn University**
**Graduate Studies Unit, Academic Services Division**

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| **Form 18 (ABC)****M.A. Program**(This form is for the thesis proposal examination, the appointment of the Thesis Examination Committee, and the nomination of external examiner(s).) |

**Guidelines for Completing Forms 18 (ABC)**

1. Students must complete Forms 18 (ABC) by typing in **bold type** **only**.
2. Enter the full name and student ID number exactly as recorded in the Office of the Registrar’s system, and specify the department, field of study, and the number of thesis/dissertation credits accurately.
3. For the thesis title in Thai, use TH Sarabun font. For the title in English or any other language, use **all capital letters**.
4. Provide the names of the principal advisor, co-advisor (if any), and examination committee members. Contact telephone numbers must be provided only for the principal advisor and co-advisor.
5. Information on Form 18 (A) must be arranged to fit on a single page. Students must also coordinate with their affiliated program to obtain the required endorsements in the sections reserved for the principal advisor, the program chair, and the head of department.
6. Students must complete Forms 18 (B) and 18 (C) and coordinate with their affiliated program to select the appropriate position/qualification/credentials corresponding to each examination committee member.
7. The submission of academic works of the external examiner must be attached in cases where the external examiner possesses the qualifications and academic works in full compliance with the *Chulalongkorn University Regulations on Criteria and Procedures for Graduate Program Examinations, B.E. 2561 (2018).*
8. In cases where the external examiner’s qualifications and academic works do not comply with the *Chulalongkorn University Regulations on Criteria and Procedures for Graduate Program Examinations, B.E. 2561 (2018),* the program must proceed with the appointment of the individual as a “**Special Expert of Chulalongkorn University**.”
9. After verifying all information for accuracy, submit the form to program/department concerned for further processing.
10. Any text highlighted in blue must be deleted if no additional information is provided.

**Form 18 A.**

**Master’s Degree**

**Thesis Proposal Form**

To be submitted to the Faculty of Arts, Chulalongkorn University

(To be completed in typewritten form only.)

Name of student (in Thai): **นาย/นาง/นางสาว**

Name of student (in English): **Mr./Mrs./Miss**  Student’s ID number **xxx xxxxx 22**

Department: Field: Credit value for thesisCredits

Program 🞎 Regular 🞎 International Date of enrollment 🞎 First semester 🞎 Second semester Year **20xx**

Mobile: E-mail:

Title of thesis (in Thai):

Title of thesis (in English):

Name of thesis adviser: Telephone:

Name of thesis co-advisor (if any): Telephone:

**Thesis examination committee**

1. ...................................................................................... Chairman ...............................................................

2. ..................................................................................... Main thesis advisor Lecturer in the academic program

3. ..................................................................................... Co-adviser **(if any)** ................................................................

4. ...................................................................................... Committee member External examiner

 Student’s signature …..……………….………………………..

 Date ……….. / ………. / ………..

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| **Program and Faculty Approvals**1. **Approved by the thesis Advisor**  Signature: ………………........…………………………. Date: .................................
2. **Approved by the Program Administration Committee in meeting no.** ........................... **held on** .................

 **Chairperson, Program Administration Committee** Signature: ………………........…………………………. Date: ................................. **Department Head** Signature: ………………........…………………………. Date: ................................1. **Approved by the Faculty of Arts Thesis Approval Committee in meeting no.** ...................... **held on** .....................

**Chairperson, Thesis Approval Committee** Signature: ………………........…………………………. Date: .................................1. **Approved by the Associate Dean** (Academic Affairs) Signature: ………………........…………………………. Date: .................................
2. **Approved by the Dean of the Faculty of Arts** Signature: ………………........…………………………. Date: .................................
3. **Approved by the board of the Faculty of Arts in meeting no.** .............................. **held on** .................

 **Secretary of the Faculty Board** Signature: ………………........…………………………. Date: ................................. |

**Form 18 B.**

 **Master’s Degree**

**Thesis Proposal Form**

 **To be submitted to the Program Administration Committee, Department of ….**

(To be completed in typewritten form only.)

Name of student (in Thai): **นาย/นาง/นางสาว** …………………………...…………………………………………………............................................................

Name of student (in English): **Mr./Mrs./Miss** … …Student’s ID number. **xxx xxxxx 22**

Department: …………………………………………………….…. Field: ……………………………..……... Credit value for thesisCredits

Title of thesis (in Thai): ……………………………………………………………………..……….

Title of thesis (in English):…………………….………………..…..………………..…..………………….…..….

Name of thesis advisor: ………………………………………..………………..………...……………..… Telephone: …..………………………………………

Name of thesis co-advisor (if any): Telephone: …..………………………………………

Objectives:

Major arguments, theories or hypotheses:

## **Stages of Research**

(Provide a record of research activity during the course of candidature. For example, data collection beginning from the second month to the middle of the third month is illustrated by drawing a line with double arrows from the left end of block no. 2 to the middle half of block no. 3.)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Stages ofResearch | Starting on **August/January** Year **20..** (first Month of the semester) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Significance of the research:

Signature: ………………………………..………………..………..

 Date: ……. / ………. / ……….

**Form 18 C.**

**Request for appointment of committee for master’s degree thesis examination**

**Submitted to the Faculty of Arts, Chulalongkorn University**

(To be completed in typewritten form only.)

**Name-last name Mr./Mrs./Miss Student ID number**

**Department**  **Division**

|  |  |
| --- | --- |
| **Name-last name** | **Position/ Educational attainment/Qualifications** |
| 1. Chairman  |  | ❑ Chairman of the academic program administrative  committee ❑ Lecturer in the academic program❑ Fulltime lecturer\* ❑ External examiner holding a doctoral degree or the equivalent and having no less than 10 national publications or having no less than 5 international publications ❑ Previously appointed Chulalongkorn University  Specialist (served from ................ to ............)❑ **Newly** appointed Chulalongkorn University  Specialist (No. ............., approved by the University  Council on…...........…)❑ Chulalongkorn University staff appointed as  Chulalongkorn University Specialist for graduate programs |
| 2. Main thesis adviser **(This person may not also hold the position of Chairman)** |  |  Lecturer in the academic program |
| 3. External committee member |  | ❑ External examiner holding a doctoral degree or the  equivalent and having no less than 10 national publications or having no less than 5 international  publications ❑ Previously appointed Chulalongkorn University  Specialist (served from ................ to ............)❑ **Newly** appointed Chulalongkorn University  Specialist (No. ............., approved by the University  Council on…...........…)❑ Chulalongkorn University staff appointed as  Chulalongkorn University Specialist for graduate programs |

**2**

 **In cases where there is a co-adviser and the number of committee members exceeds 3 persons**

|  |  |
| --- | --- |
|  **Name-last name** | **Position/ Educational attainment/Qualifications**  |
|  4. co-adviser **(if applicable)** |  | ❑ Lecturer in the academic program❑ Fulltime lecturer\* ❑ External examiner holding a doctoral degree or the equivalent and having no less than 10 national publications or having no less than 5 international publications ❑ Previously appointed Chulalongkorn University  Specialist (served from ................ to ............)❑ **Newly** appointed Chulalongkorn University  Specialist (No. ............., approved by the University  Council on…...........…)❑ Chulalongkorn University staff appointed as  Chulalongkorn University Specialist for graduate programs |
| 5. Committee member |  | ❑ Lecturer in the academic program❑ Fulltime lecturer\*❑ External examiner holding a doctoral degree or the equivalent and having no less than 10 national publications or having no less than 5 international publications ❑ Previously appointed Chulalongkorn University  Specialist (served from ................ to ............)❑ **Newly** appointed Chulalongkorn University  Specialist (No. ............., approved by the University  Council on…...........…)❑ Chulalongkorn University staff appointed as  Chulalongkorn University Specialist for graduate programs |

**แบบเสนอผลงานทางวิชาการผู้ทรงคุณวุฒิภายนอกมหาวิทยาลัย**

**เป็นกรรมการสอบวิทยานิพนธ์ สำหรับปริญญามหาบัณฑิต**

หน่วยบัณฑิตศึกษา กลุ่มภารกิจงานบริการการศึกษา คณะอักษรศาสตร์

**ชื่อ/นามสกุล** ................................................................................ **ตำแหน่งทางวิชาการ** ...............................................

**❒** เกษียณอายุราชการ

**ตำแหน่งปัจจุบัน** (หน่วยงานต้นสังกัด)................................................................................................................................

**ความเชี่ยวชาญที่เกี่ยวข้องกับหัวข้อวิทยานิพนธ์** ...........................................................................................................................................

 **เสนอให้เป็น ❒** ประธานกรรมการสอบ **❒** อาจารย์ที่ปรึกษาวิทยานิพนธ์ร่วม **❒** กรรมการสอบ

**มีผลงานทางวิชาการซึ่งตรงหรือสัมพันธ์กับหัวข้อวิทยานิพนธ์ดังต่อไปนี้**

 **ระดับนานาชาติ** (ระบุชื่อผู้แต่ง, ชื่อเรื่อง, ชื่อวารสาร, เดือน, ปี พ.ศ. ที่เผยแพร่, ปีที่, เล่มที่, เลขหน้า, ฐานข้อมูลที่ ก.พ.อ.ยอมรับ)

 1.

 2.

 3.

 4.

 5.

 **ระดับชาติ** (ระบุชื่อผู้แต่ง, ชื่อเรื่อง, ชื่อวารสาร, เดือน, ปี พ.ศ. ที่เผยแพร่, ปีที่, เล่มที่, เลขหน้า, ฐานข้อมูล **TCI 1** หรือ **TCI 2**)

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